

WATER WELL REPORT

STATE OF WASHINGTON

Application No **G1-22001**
Permit No **G1-22001P**

32/02E-2L

(1) OWNER Name **MARINERS CLUB BEACH CLUB INC COVE #3**

Address **PO Box 167 - OAK HARBOR, WA 98277**

(2) LOCATION OF WELL County **ISLAND** Lot **1-A** - NE 1/4 SW 1/4 Sec **2** T **32** N R **2E** WM

Bearing and distance from section or subdivision corner **1395' EAST & 310' SOUTH OF WEST QUARTER CORNER**

(3) PROPOSED USE Domestic ☐ Industrial ☐ Municipal ☒
Irrigation ☐ Test Well ☐ Other ☐

(4) TYPE OF WORK Owner's number of well (if more than one) **3**
New well ☒ Method Dug ☐ Bored ☐
Deepened ☐ Cable ☒ Driven ☐
Reconditioned ☐ Rotary ☐ Jetted ☐

(5) DIMENSIONS Diameter of well **8** inches
Drilled **190** ft Depth of completed well **190** ft

(6) CONSTRUCTION DETAILS

Casing installed **S** Diam from **0** ft to **180 1/2** ft
Threaded ☐ " Diam from ft to ft
Welded ☒ " Diam from ft to ft

Perforations Yes ☐ No ☒
Type of perforator used
SIZE of perforations in by in
perforations from ft to ft
perforations from ft to ft
perforations from ft to ft

Screens Yes ☒ No ☐
Manufacturer's Name **Johnson**
Type **STAINLESS** Model No **304**
Diam **8** Slot size **10** from **180** ft to **190** ft
Diam Slot size from ft to ft

Gravel packed Yes ☐ No ☒ Size of gravel
Gravel placed from ft to ft

Surface seal Yes ☒ No ☐ To what depth? **184** ft
Material used in seal **CEMENT**
Did any strata contain unusable water? Yes ☐ No ☒
Type of water? Depth of strata
Method of sealing strata off

(7) PUMP Manufacturer's Name
Type HP

(8) WATER LEVELS Land-surface elevation above mean sea level **160 APPROX** ft
Static level **127** ft below top of well Date
Artesian pressure lbs per square inch Date
Artesian water is controlled by (Cap, valve etc)

(9) WELL TESTS Drawdown is amount water level is lowered below static level
Was a pump test made? Yes ☐ No ☐ If yes by whom?
Yield gal/min with ft drawdown after hrs

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)

Time	Water Level	Time	Water Level	Time	Water Level

Date of test
Bailer test **20** gal/min with **44** ft drawdown after **10** hrs
Artesian flow gpm Date
Temperature of water Was a chemical analysis made? Yes ☐ No ☐

(10) WELL LOG

Formation Describe by color character size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation

MATERIAL	FROM	TO
DRY DIRTY SAND	0	17
HARD STICKY CLAY	17	35
SANDY CLAY (TAN TO GRAY)	35	58
DIRTY SAND (DRY)	58	76
SANDY CLAY (med SOFT)	76	134
DIRTY SAND (TAN)	134	150
SANDY CLAY (GRAY)	150	179
WATER SAND (FINE)	179	190
CLAY (HARD STICKY)	190	

WATER AQUIFER VERY FINE BUT
UNIFORM IN SIZE.

WELL NEEDED MUCH DEVELOPING
TO REACH MAX GALS

20 GPM. - BAILED FOR 4 hours
WITH THE SAME DRAWDOWN
READING

(WELL MAKES .45 GAL PER FOOT
OF WATER IN WELL)

Work started **Aug** 19 **77** Completed **SEPT 8** 19 **77**

WELL DRILLER'S STATEMENT:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief

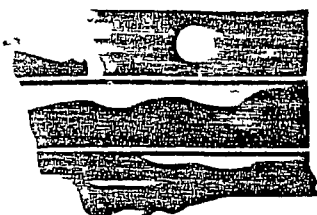
NAME **WHIDBEY DRILLERS**
(Person firm or corporation) (Type or print)

Address **OAK HARBOR WN.**

[Signed] **Dennis Jabo**
(Well Driller)

License No **129** Date **SEPT** 19 **77**

(USE ADDITIONAL SHEETS IF NECESSARY)



WASHINGTON STATE
DEPARTMENT OF
ECOLOGY

Well Tagging Form

503

Unique Well Tag No: _____

AGA923

RECORD VERIFICATION (check one)

- ☐ Well Report available (please attach this form to the well report and submit it to the Ecology Regional Office near you)
- ☐ Verification inconclusive
- ☐ Well Report not available

WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

First Name MARINER CURE

Last Name _____

Street Address 51730-W

City _____

State _____

LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

Well Address 2170 POLNELL RD

City _____

County _____

T _____ N R _____ WM Sec _____ 1/4 of the _____

FOR AGENCY USE ONLY

Latitude _____

Longitude _____

Elevation at land surface _____ feet/meters (circle one)

Additional information, if available:

☐ Location marked on topographic map (please attach)

☐ Location marked on air photo (please attach)

- ☐ GPS
- ☐ Topographic Map
- ☐ Survey
- ☐ Computer generated

- ☐ Digital Altimeter
- ☐ Topographic Map
- ☐ Other _____

The Department of Ecology does NOT Warranty the Data and/or the Information on this Well Report.

FOR AGENCY USE ONLY

WELL CHARACTERISTICS

Physical Description of well (size or casing type or well housing etc)

10' CASING - CHAIN LINK FENCE W/OFFWHITE PH AND

TWO RES PH 13 OF WOOD PANELING

Location or Well Identification Tag

Calgary

Is supplemental tag needed for ease of identifying well?

☐

Yes

☒

No

Where was tag placed?

Scale 1 24 000 (1'=2,000)

Indicate the location of the well within the Section by drawing a dot at that point.

SECTION _____

D	C	B	A
E	F	G	H
I	J	K	L
M	N	O	P
Q	R	S	T
U	V	W	X
Y	Z	AA	AB

Comments

FOR ECOLOGY WATER RESOURCES PROGRAM ONLY

Permit Right #

Date Issued

One

Application

Permit

Certificate

Claim

Exempt